

01-15-02  
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
TRANSMITTAL

Attorney Docket No.: P-10289.00  
Express Mail No.: EF157600870US

First Named Inventor or Application Identifier: KOKONES ET AL.  
Title: NEUROSTIMULATION LEAD STYLET HANDLE

CERTIFICATE UNDER 37 CFR SECTION 1.10 I hereby certify that the documents referred to as enclosed therein are being deposited with the United States Postal Service, in an envelope address "EXPRESS MAIL addressed to Box Patent Application, US PTO, P O Box 2327, Arlington VA 22202, on this 11<sup>th</sup> day of January, 2001.

Teresa Morgan  
Printed Name

Signature

BOX PATENT APPLICATION  
US PTO  
P O Box 2327  
Arlington, Virginia 22202

Sir:

We are transmitting the following:

- ☒ Patent Application Transmittal (in duplicate)
- ☒ Specification: Total Pages: 11 (specification 7 sheets; claims 3 sheets; abstract 1 sheet)
- ☒ 9 Sheets of Informal Drawings
- ☒ Signed Combined Declaration and Power of Attorney:
- ☒ Recordation Form Cover Sheet and Assignment
- ☒ Information Disclosure Statement, PTO Form SB/08A, and Copy of Cited References
- ☒ Return postcard

- ☒ Address all future correspondence to:

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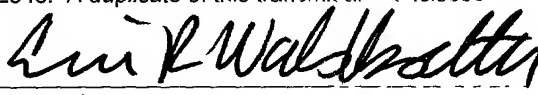
FEE CALCULATION

	No. Of Claims Filed	Claims Included in Base Fee	No. Of Extra Claims	Rate	Fee
Total Claims	11	20 =	0	x \$ 18	\$ 0.00
Independent Claims	5	3 =	2	x \$84	\$168.00
Multiple Dependent Claim(s)		0 =		+ \$ 280	
Basic Filing Fee			0		\$740.00
TOTAL					\$ 908.00

- ☒ Charge Deposit Account No. 13-2546 the sum of \$740.00 (Filing Fee) and \$168.00 for extra claims fee and \$40.00 for Assignment recordation fee for a total of **\$948.00**

- ☒ The Commissioner is hereby authorized to charge any fees, which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546. A duplicate of this transmittal is enclosed.

January 11, 2002  
Date

  
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